



annual report 1957

PRESBYTERIAN-ST. LUKE'S HOSPITAL
CHICAGO

THIS IS THE CORNERSTONE OF PRESBYTERIAN-ST. LUKE'S HOSPITAL.

ANNUAL REPORT



PRESBYTERIAN-ST. LUKE'S HOSPITAL

PRESBYTERIAN HOSPITAL: 1753 WEST CONGRESS STREET, CHICAGO 12

ST. LUKE'S HOSPITAL: 1439 SOUTH MICHIGAN AVENUE, CHICAGO 5

from this cornerstone has sprung the steel girders
you see on our cover...from it also springs
the dedicated support of men and women for a great
and benevolent institution.

Chicago . . . with its pulsating vitality . . . and
6,250,000 people throughout its
metropolitan areas . . .







many hours of painstaking and dedicated
labor . . . result in highly scientific thinking
and disciplined training . . .
and with it all the humane act to heal.

OBJECTIVE FOR 1957-58:
to complete a job well begun

RALPH A. BARD, SR.
Chairman of the Board



JOHN P. BENT
President

Eighteen months ago the consolidation of two great Chicago hospitals—St. Luke’s and Presbyterian — was consummated and a fund-raising campaign was initiated to obtain \$7,500,000 for a development program. This money will provide the funds necessary to complete the actual merging of these two institutions in one location—in the greatest concentration of medical facilities in the world—the west side medical center.

We have done well in our campaign. The trustees, the woman’s boards, and the doctors have contributed over one-third of our goal. Individuals and corporations have also backed our program handsomely. As of now we have raised \$6,500,000.

Dr. Joseph C. Hinsey, Director, New York Hospital-Cornell medical center, made the following comment in a speech delivered to our trustees and friends of the hospital this fall:

“The Presbyterian-St. Luke’s program offers an opportunity for a real investment in the future health of our nation. Your merged institution should be one of the pace-setters. Both hospitals have had a long tradition of service that more than justifies the confidence of this community.”

Our hospital is open to everyone seeking medical assistance and care. More and more it serves an expanding population, and a growing number of smaller hospitals throughout the area. We are training many of the nurses, technicians and young doctors who later will seek positions of leadership in hospitals away from the medical center, as well as in industrial medical departments.

We are undertaking to provide the highest form of medical service to our community. We are confident that everyone interested in the health problems of the metropolitan Chicago area and in the future of Presbyterian-St. Luke’s wants us to move forward with our development program, making sure that what we have set out to do is completed in a proper and efficient manner so we can report to our sponsors and contributors that the job is done—and well done!



handled with delicate skill and miraculous
accuracy . . . these instruments stand for that which
alleviates pain . . . corrects a troubled spirit . . .
and restores the fullness of life.

LOOKING TO THE FUTURE

long-range plans envision integrated hospital second to none

Our plans for the hospital are the result of comprehensive study and an awareness of present long-range trends in medical science and practice which suggest significant changes to come. Our opportunities are unique, and our course toward an integrated teaching, research and service hospital has been well plotted. We also have precedent in other large metropolitan areas where similar institutions have gained renown.

Our professional future is closely associated with the University of Illinois College of Medicine. Our ties will become closer as the interests of both the hospital and the university will be served toward higher standards of medical education and patient service.

The public is demanding improved hospital and medical care. High standards of medical service increasingly require a close association of a multitude of diagnostic, research and educational facilities and manpower. Establishment of the proper climate for the coordinated development of all these elements toward better patient care is the chief objective of our board of trustees.

With our combined resources of professional manpower and financial backing, we have many of the assets necessary for the initiation of this long-range program. All of our friends in the city, the suburbs and elsewhere have a significant stake in the development of this medical complex.

This hospital must have good facilities, the best professional staff and strong financial support. Although we are acutely aware of the inflationary trends which handicap our progress, we will continue to assume our growing responsibilities and promises to this community.

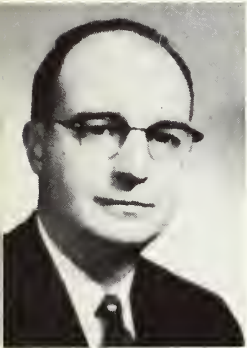
The hospital is budgeted to operate in the black, but continuous financial support is necessary to enable us to support the community services in the areas of charity, education and research.



JAMES M. KITTLEMAN
Director of Resources
and Development

A YEAR OF SIGNIFICANT PROGRESS

consolidation makes gratifying headway



DR. KARL S. KLICKA
Director

With the completion of the first full year's operation of the merged hospital, it is more than ever apparent that the idea of consolidation was a good one. The year has not been without problems. There have been many, but a willingness to resolve difficulties on the part of all concerned has made it possible to move forward.

Combination of three more important departmental functions—dietary, pharmacy, and laundry were added to the previously merged departments. *These joined operational activities are designed to meet the needs of the merged hospital and assure optimum patient care.*

Financial operation of the consolidated hospital resulted in a deficit of \$36,442. This is due to interim expenses which the past year's budget had not anticipated.

New construction and renovation in the laboratories and outpatient area of Presbyterian Hospital are worthy of mention. These changes, necessary as steps in the development of the present and future program of the merged institution, were as follows:

- (a) The bacteriology department was relocated in new quarters on the 7th floor of the Rawson Building.
- (b) A new orthopedic research laboratory was constructed in the space formerly occupied by the old bacteriological laboratory.
- (c) The eye clinic was completely renovated and refurnished.*

The cost of the bacteriology department and the orthopedic research laboratory, totaling \$60,000, was financed by other than operating funds.

Progress on the new wing is good. All work is on schedule. The architects have spent many hours in conference with members of the board of trustees and the medical staff developing the master plan to meet the long-term needs of the hospital.

The master plan for the consolidated institution understandably is larger in scope than it would have been for either hospital alone. We are confronted with growing pains that could hardly have been imagined by either hospital two years ago. *But problems are being resolved and a great hospital will emerge.*

As would be expected, the two staffs have had different opinions regarding some phases of organization and administration. These varying viewpoints are being resolved at the conference table and gratifying headway is being made.

Space does not permit a detailed summary of departmental activities. Such a record would include many interesting accomplishments which will have a significant place in the history of the development program. We must also remember that statistics reflect evergrowing hospital services, but do not tell the hardships endured to provide them in areas disrupted by construction and renovation. We are all indebted to the employees of the hospital for their patience and effort.

*This project was underwritten by the Blind Service Association, Inc.



THE PROPOSED EMPLOYEES' APARTMENT BUILDING

Beauty and function are shown in this building to house nurses, interns, graduate nurses, medical house officers and other technical staff. It faces on the Congress Street expressway at Damen and Harrison Streets. This reinforced concrete building of aluminum and glass will have most of its accommodations in one bedroom units with some two bedroom and efficiency apartments, as well as a few three bedroom accommodations. The building will be serviced by "skip-stop" elevators with the elevator

corridors occurring on every third floor. This will permit through ventilation and a view of the north and south for over 75% of the units.

It will occupy a three and one-half acre site. Parking will be available for about 125 cars. Play areas and landscaped lawns will surround the building on the south and east. This will be the first significant structure to house medical center personnel in the area established for residential use.

1.2¢	administration
8.9¢	laundry and housekeeping
6.0¢	maintenance and repairs
14.5¢	dietary
11.3¢	x-ray and other laboratories' services
13.8¢	general services
11.2¢	medical services and drugs
33.1¢	nursing service and education



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 S. JAMES SCHROEDER, Assistant Administrator, Professional Services,
 St. Luke's Hospital

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JAMES M. KITTLEMAN, Director
 JOHN R. MINOR, Assistant Director

*Deceased.

STATISTICS 1956/57

Total Admissions.....	<u>29,419</u>	Autopsies—566; Percentage.....	70.80%
Adults.....	26,134	Operations Performed.....	16,133
Infants.....	3,285	X-Ray Examinations and Treatments.....	90,025
Total Days Care of Patients.....	<u>284,287</u>	Electrocardiograms.....	14,852
General Hospital.....	209,613	Electroencephalograms.....	1,466
Psychiatric.....	15,817	Physical Therapy Treatments.....	44,760
Pediatrics.....	18,515	Vascular Therapy.....	399
Maternity—Mothers.....	19,451	Basal Metabolism.....	3,245
Maternity—Newborn.....	18,201	Blood Transfusions.....	8,259
Premature.....	1,632	Laboratory Examinations.....	635,535
Student Nurse Infirmary.....	1,058		
Percentage of Occupancy (Excluding Newborn).....	75.0%		

CLINIC VISITS

	CENTRAL FREE DISPENSARY	MORTON CLINIC	TOTAL
Chicago Welfare Department.....	12,307	2,311	14,618
Cook County Department of Welfare.....	16,439	5,704	22,143
All Others.....	<u>43,407</u>	<u>24,621</u>	<u>68,028</u>
Total Visits.....	<u>72,153</u>	<u>32,636</u>	<u>104,789</u>
Clinic Patients Admitted to the Hospital.....	1,571	1,556	3,127

STATEMENT OF INCOME

OPERATING FUND for the Year Ended August 31, 1957

OPERATING REVENUE:

Room and board.....	\$ 5,477,595
Departmental services.....	4,958,357
Clinic.....	200,413
Tuition, etc., of nurses.....	88,343
Less—Free service, allowances, etc. (excluding deficit from operation of Clinics).....	(486,883)
Total operating revenue.....	\$10,237,825

OPERATING EXPENSES.....	<u>11,521,036</u>
Loss from operations.....	\$ (1,283,211)

OTHER INCOME OR (EXPENSE):

Income allocated from other funds—	
Investment income used for general hospital purposes.....	\$ 364,850
Investment income, Woman's Board funds, donated funds and other receipts used for specifically designated purposes such as free patient care, research, etc.....	674,391
Donations for current operations—	
Churches, individuals and other organizations.....	71,556
Community Fund.....	125,595
Rentals, etc.....	44,315
Interest on indebtedness.....	(30,920)
Excess of expense over income.....	<u>\$ (33,424)</u>

The accompanying notes on page 13 are an integral part of the above statement.

assets**OPERATING FUND:**

Cash.....	\$ 133,660	
U.S. Government securities, at cost (market \$19,200).....	19,747	
Patient accounts receivable, less reserve of \$345,809 for losses in collection.....	1,043,608	
Other receivables.....	130,708	
Inventories at cost.....	344,145	
Prepaid expenses.....	59,322	\$ 1,731,190
Plant assets (Note 1)—		
Land and buildings at recorded value not in excess of cost (without reduction for accrued depreciation on hospital buildings).....	\$11,462,344	
Equipment, at cost, less reserve for depreciation of \$1,341,107.....	1,005,692	12,468,036
		<u>\$14,199,226</u>

BALANCE SHEET

AUGUST 31, 1957

DEVELOPMENT FUND (Note 2):

Construction in process.....	\$ 4,602,790
Funds held for construction (including investments of \$1,483,123; market \$1,485,631).....	2,139,839
Pledges due from contributors.....	2,358,429
	<u>\$ 9,101,058</u>

ENDOWMENT AND OTHER FUNDS:

Cash.....	\$ 342,062
Investments, at August 31, 1957 market value (Note 3).....	18,936,799
Real estate advance to General Fund.....	1,229,848
Other assets.....	79,639
	<u>\$20,588,348</u>

\$43,888,632

PRESBYTERIAN—ST. LUKE'S HOSPITAL

STATEMENT OF CHANGES IN FUND BALANCES For the Year ended

	OPERATING FUND		DEVELOPMENT FUND
	OPERATING SURPLUS	EQUITY IN PLANT ASSETS	FUND BALANCE
BALANCES AT AUGUST 31, 1956.....	\$ 80,216	\$10,276,630	\$2,683,190
ADDITIONS OR (DEDUCTIONS):			
Net income (loss) for the year.....	(33,424)	—	54,600
Gifts, bequests and general and specific purpose research and educational grants.....	—	—	5,433,000
Reduction in market value of pooled investments, net of gains realized on dispositions (\$468,046).....	—	—	—
Income allocated to operating fund—			
Investment income used for general hospital purposes.....	—	—	—
Investment income, Woman's Board funds, donated funds and other receipts used for specifically designated purposes such as free patient care, research, etc.....	—	—	—
Woman's Board funds used for hospital furnishings, equipment, etc.....	—	—	—
Expenditures and other charges against fund balances not considered applicable to general hospital operations—			
Research and educational expenditures.....	—	—	—
Development Fund campaign expenditures.....	—	—	(207,300)
Mortgage payments.....	(55,534)	55,534	—
Appropriations of Expendable Funds for working capital purposes.....	734,889	—	—
Transfer of funds for Development Fund purposes.....	—	—	55,000
Additions to plant assets, less annual provisions for depreciation (\$108,997).....	(77,188)	144,024	—
Excess of market value over cost of pooled investments as of September 1, 1956 (Note 3).....	—	—	—
Other transactions.....	21,728	—	(17,300)
BALANCES AT AUGUST 31, 1957.....	<u>\$670,687</u>	<u>\$10,476,188</u>	<u>\$8,001,290</u>

liabilities

OPERATING FUND:

Current portion of long-term debt.....	\$ 55,535	
Accounts payable and accrued liabilities.....	891,225	\$ 946,760
Long-term debt—		
Mortgage note, 4%, payable \$6,000 quarterly to July, 1960, and balance on October 1, 1960.....	\$ 762,000	
Real estate advance from Endowment Fund, 4%, payable in equal monthly installments to August 31, 1996.....	1,229,848	
	\$ 1,991,848	
Less—Current portion shown above.....	55,535	1,936,313
Reserve for major repairs and nonrecurring expenditures.....		169,278
Operating Fund balance—		
Operating surplus.....	\$ 670,687	
Equity in plant assets.....	10,476,188	11,146,875
		<u>\$14,199,226</u>

DEVELOPMENT FUND (Note 2):

Payment due contractor.....	\$ 1,099,765
Development Fund balance.....	8,001,293
	<u>\$ 9,101,058</u>

ENDOWMENT AND OTHER FUNDS:

Advances from outside sources for specific research and educational grants.....		\$ 327,426
Fund balances (Note 3)—		
Endowment Funds, invested to produce income for—		
Research and education.....	\$ 4,197,984	
Free patient care, etc.....	3,976,348	
General hospital use.....	6,917,341	15,091,673
Expendable Funds, invested to produce income for general hospital use.....		3,644,233
Unexpended Specific Purpose Funds for—		
Research and education.....	\$ 774,665	
Free patient care, etc.....	333,592	1,108,257
Woman's Board Funds—		
Presbyterian.....	\$ 195,012	
St. Luke's.....	221,747	416,759
		<u>\$20,588,348</u>
		<u>\$43,888,632</u>

To the Board of Trustees
Presbyterian-St. Luke's Hospital
Chicago, Illinois

We have examined the balance sheet of Presbyterian-St. Luke's Hospital (an Illinois not for profit corporation) as of August 31, 1957, and the related statements of changes in fund balances and income for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

It is the policy of the Hospital to make no provision for depreciation of Hospital buildings. In addition, at the St. Luke's division of the Hospital, operations were charged with the cost of equipment additions in lieu of providing depreciation on equipment. Depreciation on St. Luke's equipment had been provided for the period January 1 to August 31, 1956; this change in practice resulted in reducing charges to operations of the current year by \$65,371.

With the above explanation, in our opinion, the accompanying balance sheet and related statements of changes in fund balances and income present fairly the financial position of Presbyterian-St. Luke's Hospital at August 31, 1957, and the results of its operations for the year then ended, and were prepared in conformity with generally accepted accounting principles applied on a basis consistent with that of the preceding year.

Chicago, Illinois
October 29, 1957
Arthur Andersen & Co.

August 31, 1957

ENDOWMENT & OTHER FUNDS

ENDOWMENT FUNDS	EXPENDABLE FUNDS	UNEXPENDED SPECIFIC PURPOSE FUNDS	WOMAN'S BOARD FUNDS	
			PRESBYTERIAN	ST. LUKE'S
\$11,679,873	\$3,361,714	\$1,226,036	\$169,727	\$206,315
515,742	123,202	55,798	49,993	108,433
215,429	248,456	742,182	—	—
(313,891)	(75,245)	(3,015)	(3,100)	—
(241,648)	(123,202)	—	—	—
(274,094)	—	(273,890)	(43,507)	(82,900)
—	—	—	(8,848)	(10,101)
—	—	(555,264)	—	—
—	—	—	—	—
—	—	—	—	—
—	(734,889)	—	—	—
—	—	(55,032)	(10)	—
—	—	(66,836)	—	—
3,541,439	851,111	—	31,466	—
(31,177)	(6,914)	38,278	(709)	—
<u>\$15,091,673</u>	<u>\$3,644,233</u>	<u>\$1,108,257</u>	<u>\$195,012</u>	<u>\$221,747</u>

NOTES TO FINANCIAL STATEMENTS

- (1) It is the policy of the Hospital to make no provision for depreciation of Hospital buildings. In addition, at the St. Luke's division of the Hospital, operations were charged with the cost of equipment additions in lieu of providing depreciation on equipment. Depreciation on St. Luke's equipment had been provided for the period January 1 to August 31, 1956; this change in practice resulted in reducing charges to operations of the current year by \$65,371.
- (2) The Hospital is currently engaged in a development program for the expansion of its plant facilities. Total commitments outstanding as of August 31, 1957, approximate \$7,000,000.
- (3) The equity of the Endowment and Other Funds in the investment pool is periodically adjusted to reflect the current market values of such investments. Accordingly, assets, liabilities and fund equities are shown in the balance sheets at August 31, 1957, market value.

Because of a general decrease in security values since August 31, 1957, values attributable to Endowment and Expendable Funds had decreased approximately 5% as of the date these statements were prepared, October 29, 1957.

LIST OF CONTRIBUTORS

Below are listed all those contributors who have given to the development program. We are grateful to them and to the anonymous donors. We would also like to express our appreciation to those who have made gifts to the hospital for free service, research and teaching, but who are not listed below.

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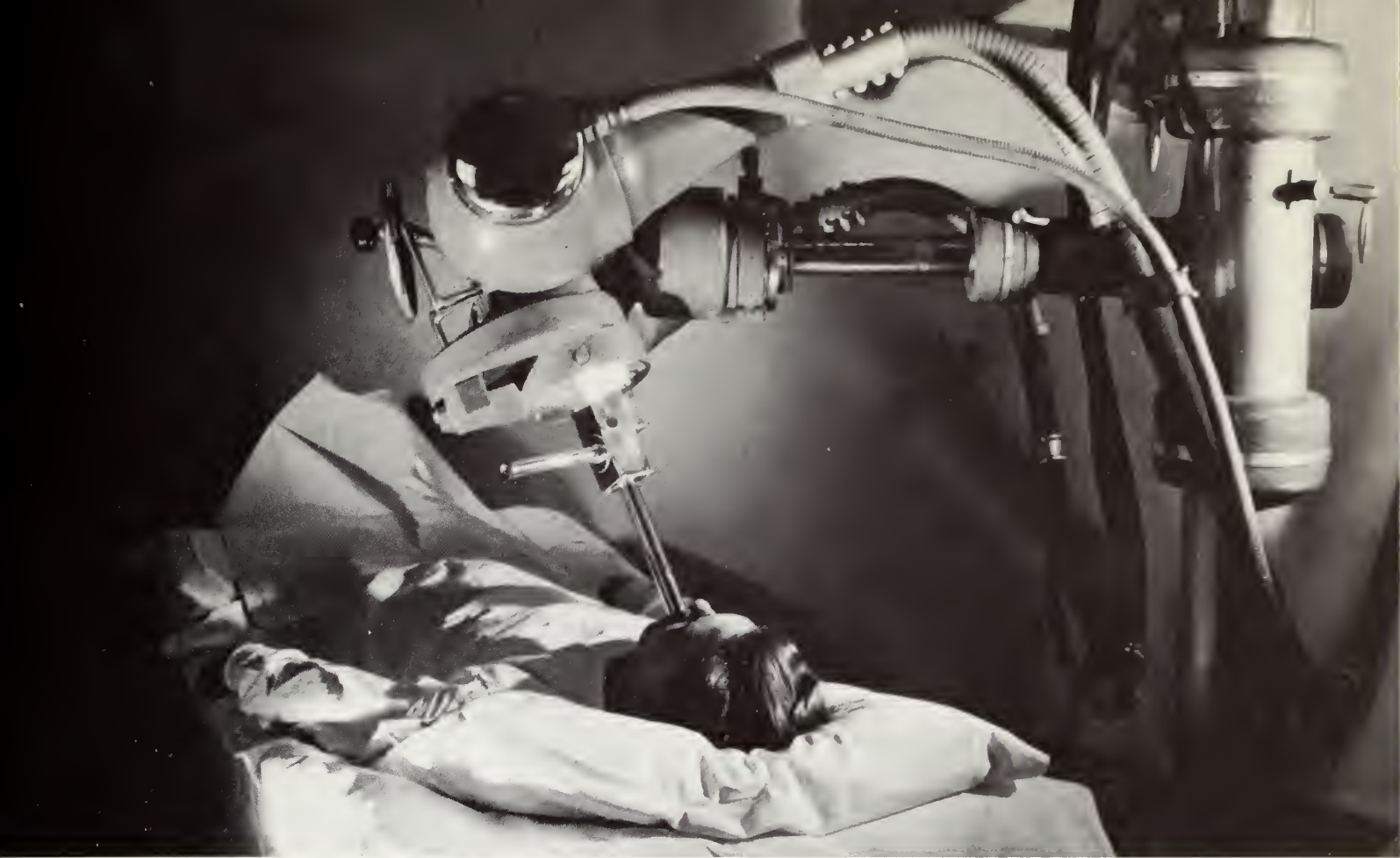
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REPORT OF PRESBYTERIAN WOMAN'S BOARD



MRS. CHARLES BALFANZ
President

The year has been stimulating and challenging for members who have learned to think in terms of the larger hospital. Already we have found opportunities to work on projects with the woman's board of St. Luke's. *The results have been gratifying for both groups.*

Joint action on the part of the two boards first occurred at the appointing of a committee to study designs for the uniform, cap and pin for the Presbyterian-St. Luke's school of nursing. Another cooperative venture was the purchasing of a station wagon for the use of the school of nursing. Members of the Presbyterian woman's board also served on committees for the St. Luke's fashion show.

Our membership this past year included representation from the Chicago Presbyterian Society, the Doctors' Wives Auxiliary, the Winnetka Auxiliary, the Westminster Foundation, the Junior League of Chicago, 54 Chicago area Presbyterian churches and a large general membership. A sustaining membership was created this year for the convenience of regular members who cannot actively participate in the board's program.

Funds from eleven fund-raising committees and other income sources were disbursed to the hospital for free care of children, free drugs, free nursing care, nurse scholarships, the chapel, the library, social service and maternity care.

In closing I would like to express the gratitude of the entire board for the support and cooperation of the administrative and professional staffs, the development office and the board of trustees.

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REPORT OF ST. LUKE'S WOMAN'S BOARD

This has been a history-making year. Within two years St. Luke's Hospital as such will cease to exist, but the traditions and ideals which were born within its walls will be carried on in our new home, Presbyterian-St. Luke's.

The hospital promises to be second to none among the modern medical centers of the world. It should give all of us a great thrill to be able to consider ourselves a part of this wonderful new project and to know that our efforts will soon see fruition.

Our funds this year have principally supported the outpatient clinics and school of nursing. They also provided linen and furnishings for the hospital.

No matter how carefully and expertly the building planners, architects and contractors may complete the physical facilities of the new hospital, it would be a hollow shell, indeed, without the enthusiastic support and devotion of all the St. Luke's and Presbyterian families.

In January, at the request of the board of trustees, Mrs. Balfanz, president of the Presbyterian woman's board, and I were asked to appoint three members from each group in addition to ourselves to form a committee of eight to be known as a coordinating committee. The group was to study the future organization of the women's activities.

This committee held several meetings and in an atmosphere of complete cooperation and careful analysis, worked out plans for a new organization to be known as the woman's governing board. It will be composed of five members from each woman's board appointed by the presidents for a one-year term. The new board will be under the co-chairmanship of the woman's boards' presidents.

The board of trustees approved this plan of integration and the appointments will soon be announced.



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